



**DEDHAM PARKS & RECREATION DEPARTMENT  
GYMNASTICS PROGRAM  
SUMMER 2012**

**JOYCE MULKERN, SUPERVISOR**

**NAME** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **TOWN** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PARENT/GUARDIANS NAME** \_\_\_\_\_ **TEL #** \_\_\_\_\_

**HAVE YOU EVER TAKEN RECREATION GYMNASTICS BEFORE? YES** \_\_\_\_\_ **NO** \_\_\_\_\_

**PROGRAM CONSISTS OF TWO SESSIONS...4 CLASSES EACH....\$35.00**

**PLEASE CIRCLE DESIRED CLASS.....**

**1<sup>st</sup> SESSION....JUNE 25<sup>TH</sup> THRU JULY 16, 2012 (MONDAYS ONLY)**

**MONDAY AGES 4 & 5....9:00-10:30AM**

**MONDAY GRADES 1 & 2....10:30-12:00PM**

**MONDAY GRADES 1 & 2....12:00-1:30PM**

**MONDAY GRADES 3 & UP....1:30-3:00PM**

**2<sup>ND</sup> SESSION....JULY 23<sup>RD</sup> THRU AUGUST 13, 2012 (MONDAYS ONLY)**

**MONDAY AGES 4 & 5....9:00-10:30AM**

**MONDAY GRADES 1 & 2....10:30-12:00PM**

**MONDAY GRADES 1 & 2....12:00-1:30PM**

**MONDAY GRADES 3 & UP....1:30-3:00PM**

**BY MY SIGNATURE, I HEREBY RELEASE THE TOWN OF DEDHAM, PARKS & RECREATION DEPARTMENT  
FROM ANY LIABILITY REGARDING INJURY WHILE PARTICIPATING IN THIS PROGRAM.....**

**PARENT/GUARDIANS SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_